



Request for Quote

Page 1 of 4

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
ONE CAPITOL HILL
PROVIDENCE RI 02908

CREATION DATE : 18-MAR-13
BID NUMBER: 7461333
TITLE: BIOMEDICAL/MECHANICAL EQUIPMENT SAFETY
INSPECTION AND REPAIR - ELEANOR SLATER

BLANKET START : 01-MAY-13
BLANKET END : 30-APR-18
BID CLOSING DATE AND TIME: 09-APR-2013 10:30:00

BUYER: Melillo, Charlotte A
PHONE #: 401-574-8110

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DOA CONTROLLER
ONE CAPITOL HILL, 4TH FLOOR
SMITH ST
PROVIDENCE, RI 02908
US

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BHDDH-ESH CENTRAL RECEIVING
REGAN BLDG, FIRST FLOOR
ATTN: SEE BELOW
CRANSTON, RI 02920
US

Requisition Number: 1295613

Line	Description	Quantity	Unit	Unit Price	Total
	5/1/13 - 4/30/18. DELIVER TO: ELEANOR SLATER HOSPITAL 111 HOWARD AVE CRANSTON, RI 02920 AND ELEANOR SLATER HOSPITAL 2090 WALLUM LAKE ROAD PASCOAG, RI 02859 * BUYER EMAIL charlotte.melillo@purchasing.ri.gov FOR QUESTIONS REGARDING THIS BID. QUESTIONS WILL BE ENTERTAINED UNTIL MARCH 29, 2013 AT NOON. *				
1	5/1/13 - 6/30/13 BIOMEDICAL EQUIPMENT LABOR RATE PER HOUR FOR PREVENTIVE MAINTENANCE AND EQUIPMENT CERTIFICATION RATE STARTS ON THE JOB	166.00	Hour		
2	7/1/13 - 6/30/14 BIOMEDICAL EQUIPMENT LABOR RATE PER HOUR FOR PREVENTIVE MAINTENANCE AND EQUIPMENT CERTIFICATION RATE STARTS ON THE JOB	1,000.00	Hour		
3	7/1/14 - 6/30/15 BIOMEDICAL EQUIPMENT LABOR RATE PER HOUR FOR PREVENTIVE MAINTENANCE AND EQUIPMENT CERTIFICATION RATE STARTS ON THE JOB	1,000.00	Hour		
4	7/1/15 - 6/30/16 BIOMEDICAL EQUIPMENT LABOR RATE PER HOUR FOR PREVENTIVE MAINTENANCE AND EQUIPMENT CERTIFICATION RATE STARTS ON THE JOB	1,000.00	Hour		
5	7/1/16 - 6/30/17 BIOMEDICAL EQUIPMENT LABOR RATE PER HOUR FOR PREVENTIVE MAINTENANCE AND EQUIPMENT CERTIFICATION RATE STARTS ON THE JOB	1,000.00	Hour		
6	7/1/17 - 4/30/18 BIOMEDICAL EQUIPMENT LABOR RATE PER HOUR FOR PREVENTIVE MAINTENANCE AND EQUIPMENT CERTIFICATION RATE STARTS ON THE JOB	834.00	Hour		
7	5/1/13 - 6/30/13 MECHANICAL EQUIPMENT LABOR RATE PER HOUR FOR PREVENTIVE MAINTENANCE AND EQUIPMENT CERTIFICATION RATE STARTS ON THE	100.00	Hour		

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	JOB				
8	7/1/13 - 6/30/14 MECHANICAL EQUIPMENT LABOR RATE PER HOUR FOR PREVENTIVE MAINTENANCE AND EQUIPMENT CERTIFICATION RATE STARTS ON THE JOB	600.00	Hour		
9	7/1/14 - 6/30/15 MECHANICAL EQUIPMENT LABOR RATE PER HOUR FOR PREVENTIVE MAINTENANCE AND EQUIPMENT CERTIFICATION RATE STARTS ON THE JOB	600.00	Hour		
10	7/1/15 - 6/30/16 MECHANICAL EQUIPMENT LABOR RATE PER HOUR FOR PREVENTIVE MAINTENANCE AND EQUIPMENT CERTIFICATION RATE STARTS ON THE JOB	600.00	Hour		
11	7/1/16 - 6/30/17 MECHANICAL EQUIPMENT LABOR RATE PER HOUR FOR PREVENTIVE MAINTENANCE AND EQUIPMENT CERTIFICATION RATE STARTS ON THE JOB	600.00	Hour		
12	7/1/17 - 4/30/18 MECHANICAL EQUIPMENT LABOR RATE PER HOUR FOR PREVENTIVE MAINTENANCE AND EQUIPMENT CERTIFICATION RATE STARTS ON THE JOB	500.00	Hour		
13	5/1/13 - 6/30/13 NON CLINICAL/NON-INVENTORIED EQUIPMENT INSPECTION FLAT RATE	84.00	Each		
14	7/1/13 - 6/30/14 NON CLINICAL/NON-INVENTORIED EQUIPMENT INSPECTION FLAT RATE	500.00	Each		
15	7/1/14 - 6/30/15 NON CLINICAL/NON-INVENTORIED EQUIPMENT INSPECTION FLAT RATE	500.00	Each		
16	7/1/15 - 6/30/16 NON CLINICAL/NON-INVENTORIED EQUIPMENT INSPECTION FLAT RATE	500.00	Each		
17	7/1/16 - 6/30/17 NON CLINICAL/NON-INVENTORIED EQUIPMENT INSPECTION FLAT RATE	500.00	Each		
18	7/1/17 - 4/30/18 NON CLINICAL/NON-INVENTORIED EQUIPMENT INSPECTION FLAT RATE	416.00	Each		
19	5/1/13 - 6/30/13 BIOMEDICAL EQUIPMENT INSPECTION	166.00	Each		

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Requisition Number: 1295613

Line	Description	Quantity	Unit	Unit Price	Total
	FLAT RATE				
20	7/1/13 - 6/30/14 BIOMEDICAL EQUIPMENT INSPECTION FLAT RATE	1,000.00	Each		
21	7/1/14 - 6/30/15 BIOMEDICAL EQUIPMENT INSPECTION FLAT RATE	1,000.00	Each		
22	7/1/15 - 6/30/16 BIOMEDICAL EQUIPMENT INSPECTION FLAT RATE	1,000.00	Each		
23	7/1/16 - 6/30/17 BIOMEDICAL EQUIPMENT INSPECTION FLAT RATE	1,000.00	Each		
24	7/1/17 - 4/30/18 BIOMEDICAL EQUIPMENT INSPECTION FLAT RATE	834.00	Each		
25	5/1/13 - 6/30/13 ADMINISTRATIVE HOURS (MEETINGS)	10.00	Hour		
26	7/1/13 - 6/30/14 ADMINISTRATIVE HOURS (MEETINGS)	10.00	Hour		
27	7/1/14 - 6/30/15 ADMINISTRATIVE HOURS (MEETINGS)	10.00	Hour		
28	7/1/15 - 6/30/16 ADMINISTRATIVE HOURS (MEETINGS)	10.00	Hour		
29	7/1/16 - 6/30/17 ADMINISTRATIVE HOURS (MEETINGS)	10.00	Hour		
30	7/1/17 - 4/30/18 ADMINISTRATIVE HOURS (MEETINGS)	10.00	Hour		
31	5/1/13 - 6/30/13 EMERGENCY HOURLY LABOR RATE FOR ALL SERVICES	10.00	Hour		
32	7/1/13 - 6/30/14 EMERGENCY HOURLY LABOR RATE FOR ALL SERVICES	10.00	Hour		

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Line	Description	Quantity	Unit	Unit Price	Total
33	7/1/14 - 6/30/15 EMERGENCY HOURLY LABOR RATE FOR ALL SERVICES	10.00	Hour		
34	7/1/15 - 6/30/16 EMERGENCY HOURLY LABOR RATE FOR ALL SERVICES	10.00	Hour		
35	7/1/16 - 6/30/17 EMERGENCY HOURLY LABOR RATE FOR ALL SERVICES	10.00	Hour		
36	7/1/17 - 4/30/18 EMERGENCY HOURLY LABOR RATE FOR ALL SERVICES	10.00	Hour		
37	5/1/13 - 6/30/13 PARTS (PERCENTAGE DISCOUNT OFF MANUFACTURING PRICING)		%		
38	7/1/13 - 6/30/14 PARTS (PERCENTAGE DISCOUNT OFF MANUFACTURING PRICING)		%		
39	7/1/14 - 6/30/15 PARTS (PERCENTAGE DISCOUNT OFF MANUFACTURING PRICING)		%		
40	7/1/15 - 6/30/16 PARTS (PERCENTAGE DISCOUNT OFF MANUFACTURING PRICING)		%		
41	7/1/16 - 6/30/17 PARTS (PERCENTAGE DISCOUNT OFF MANUFACTURING PRICING)		%		
42	7/1/17 - 4/30/18 PARTS (PERCENTAGE DISCOUNT OFF MANUFACTURING PRICING)		%		
43	MEDIMIZER,EQUIPMENT MANAGEMENT SOFTWARE (PRICING TO INCLUDE FIRST YEAR SUPPORT AGREEMENT, TRAINING ASSOCIATED WITH THE IMPLEMENTATION OF SOFTWARE)	1.00	Each		

Delivery: _____

Terms of Payment: _____

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**BHDDH - ELEANOR SLATER HOSPITAL
CRANSTON / ZAMBARANO UNIT
BIOMEDICAL / MECHANICAL EQUIPMENT
SAFETY INSPECTION AND REPAIR
SCOPE OF WORK**

Services Include:

- A. Attend hospital meetings i.e.; Safety Committee, Emergency Management Committee, Medical Equipment, Medical Equipment Selection and Acquisition Committee, assist and attend meetings in preparation of Joint Commission on Accreditation Survey, review of Medical Equipment Management Plan

Inventory, electrical Safety inspection, preventative maintenance, evaluation, and repair of all specified equipment in accordance with hospital protocol and risk ranking criteria within the following categories:

Biomedical Equipment: Oxygen Concentrators, Defibrillators, Suction Pumps, Centrifuges, Vital Signs Monitors, Pulse Oximeters, Thermometers, Adaptive Equipment/Powered Wheelchairs, AED, Electric Beds, and EKG Machines, etc.

Mechanical Equipment: Stretchers, Wheelchairs, Recliners, IV Poles, Mechanical Beds, Patient Lifts, Overbed tables, and Medication/Treatment Carts, etc.

- B. To include a bar/numerically coded asset number along with inspection label indicating test type(s), test results, next scheduled inspection, and the technician that performed the test. Results will then be entered into a computerized medical equipment safety analyzer which complies with NFPA 99 standards and JCAHO requirements and sent to the hospital administrator once the testing and computer updating is complete. Should a piece of equipment fail inspection, it will be red-tagged, documented, and removed from service until corrective action is taken.
- C. To include all parts necessary for the completion of preventative maintenance and repairs. Hospital administration to authorize the purchase of all parts exceeding \$100.00. The warranty of any part is at the sole discretion of the individual manufacturer.
Note: The hospital has the option to order parts directly through the manufacturer or to order through supplier. (See part pricing table outlined below).
- D. Hospital administration to be notified of all equipment repairs exceeding 50% of the equipment replacement value prior to repairs being performed.
- E. All biomedical and mechanical equipment inspection, maintenance, and repair work will be performed in accordance with equipment management software specifications and hospital protocol. (See Pricing Options 1 below). Medimizer® equipment management software will be used for equipment inventory and tracking purposes, maintenance history, and equipment recall research.

- 2
- F. All labor times spent to perform inspection, maintenance, and repairs will be billed in accordance with the rate charts listed below per specified date ranges.
 - G. Supplier services will be warranted for ninety (90) days under normal operating procedures. Equipment that is damaged by misuse or abuse will not be covered under this warranty.
 - H. Any services required outside normal working hours (Monday thru Friday, 7:00am to 5:00pm) or during holidays will be billed separately, portal to portal.
 - I. Supplier will carry a minimum of \$1,000,000.00 of General Commercial Liability Insurance.

Warranty, Disclaimer and Limitation of Remedies

Supplier warrants that its services will be performed in accordance with the standards expressly stated in the sections of this agreement entitled (A-I). Supplier liability hereunder is limited to the repair or replacement of any item of equipment that supplier damages during the performance of services under this agreement. This remedy is exclusive of any other remedy which Eleanor Slater Hospital might otherwise have at law or in equity, and whether based upon a theory of contract, tort, strict liability or otherwise.

Terms

This agreement will remain in effect from 1/1/2013 and end on 12/31/2017 can be terminated by either party with a thirty (30) day written notice by certified mail. Both parties agree to review the provisions of this contract annually for the purpose of ascertaining whether this contract (or revision) is necessary or advisable to provide adequate professional services.

Pricing

The following pricing template structure will apply to all work performed in either hospital, ESH – Cranston / Zambarano Unit per year. *Administrative hour (meetings) to be billed separately.*

Biomedical

Section Rates

Year	ALL PRICING SHOULD BE ENTERED ON "REQUEST FOR QUOTE" SHEETS ONLY.			Emergency Hourly Labor Rate for all services
1/1/2013 – 12/31/2013				
1/1/2014 – 12/31/2014				
1/1/2015 – 12/31/2015				
1/1/2016 – 12/31/2016				
1/1/2017 – 12/31/2017				

ALL PRICING SHOULD BE ENTERED
ON "REQUEST FOR QUOTE" SHEETS
ONLY.

Manufact

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Non-Clinical/Non-Inventoried Equipment Labor and Inspection Rates

Non-Clinical/Non-Inventoried Equipment:

Non-Inventory and visual inspection only of all specified equipment in accordance with hospital protocol within the following category:

Annual visual inspection only of all patient related Radios, TVs, and Computer systems, etc.

Year
1/1/2013 – 12/31/20
1/1/2014 – 12/31/20
1/1/2015 – 12/31/20
1/1/2016 – 12/31/20
1/1/2017 – 12/31/20

ALL PRICING SHOULD BE ENTERED
ON "REQUEST FOR QUOTE" SHEETS
ONLY.

Hourly Labor Rate for services

Pricing Option 1: The supplier will submit bid pricing on: Medimizer® equipment management software to be purchased by hospital, pricing will include first year support agreement, and training associated with the implementation of software.

Hospital will purchase annual support agreement directly through Medimizer® from years two (2) through five (5). The supplier is responsible for the installation of software and maintenance of Medimizer® equipment management software.

Note 1: Hospital will provide a complete computer system (specifications provided by supplier to Hospital IT support department).

Contract Terms and Conditions

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Terms and Conditions

BID STANDARD TERMS AND CONDITIONS

TERMS AND CONDITIONS FOR THIS BID

PURCHASE AGREEMENT BID

BIDDING (a) A single price shall be quoted for each item against which a proposal is submitted. This price will be the maximum in effect during the agreement period. Any price decline at the manufacturer's level shall be reflected in a reduction of the agreement price to the State. (b) Quantities, if any, are estimated only. The agreement shall cover the actual quantities ordering during the period. Deliveries will be billed at the single, firm, awarded unit price quoted regardless of the quantities ordered. (c) Bid price is net F.O.B. destination and shall include inside delivery at no extra cost. (d) Bids for single items and/or a small percentage of total items listed, may, at the State's sole option, be rejected as being non-responsive to the intent of this request. **ORDERING** (a) The User Agency(s) will submit individual orders for the various items and various quantities as may be required during the agreement period. (b) Exception - Regardless of any agreement resulting from this bid, the State reserves the right to solicit prices separately for any extra large requirements for delivery to specific destinations.

RIVIP INFO - BID SUBMISSION REQUIREMENTS

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INSURANCE REQUIREMENTS (ADDITIONAL)

ANNUAL RENEWAL INSURANCE CERTIFICATES FOR WORKERS' COMPENSATION, PUBLIC LIABILITY, PROPERTY DAMAGE INSURANCE, AUTO INSURANCE, PROFESSIONAL LIABILITY INSURANCE (AKA ERRORS & OMISSIONS), BUILDER'S RISK INSURANCE, SCHOOL BUSING AUTO LIABILITY, ENVIRONMENTAL IMPAIRMENT (AKA POLLUTION CONTROL), VESSEL OPERATION (MARINE OR AIRCRAFT) PROTECTION & INDEMNITY, ETC., MUST BE SUBMITTED TO THE SPECIFIC AGENCY IDENTIFIED IN THE "BILL TO" SECTION OF THE PURCHASE ORDER. CERTIFICATES ARE ANNUALLY DUE PRIOR TO THE BEGINNING OF ANY CONTRACT PERIOD BEYOND THE INITIAL TWELVE-MONTH PERIOD OF A CONTRACT. FAILURE TO PROVIDE ANNUAL INSURANCE CERTIFICATION MAY BE GROUNDS FOR CANCELLATION.

LICENSE REQUIREMENTS

VENDOR (OWNER OF COMPANY) IS RESPONSIBLE TO COMPLY WITH ALL LICENSING OR STATE PERMITS REQUIRED FOR THIS TYPE OF SERVICE. A COPY OF LICENSE/PERMIT SHOULD BE SUBMITTED WITH THIS BID. IN ADDITION TO THESE LICENSE REQUIREMENTS, BIDDER, BY SUBMISSION OF THIS BID, CERTIFIES THAT ANY/ALL WORK RELATED TO THIS BID, AND ANY SUBSEQUENT AWARD WHICH REQUIRES A RHODE ISLAND LICENSE(S), SHALL BE PERFORMED BY AN INDIVIDUAL(S) HOLDING A VALID RHODE ISLAND LICENSE.

READING VENDOR NAMES ONLY

DUE TO LENGTH OF BID AND TIME CONSTRAINTS, THE STATE WILL ONLY

ACKNOWLEDGE RECEIPT AND READ THE NAMES OF VENDORS SUBMITTING PROPOSALS. NO EXAMINATION OF DOCUMENTS OR PRESENTATION OF INFORMATION CONTAINED IN PROPOSALS WILL BE MADE AVAILABLE AT THE BID OPENING; HOWEVER, INSTRUCTIONS TO OBTAIN THE TABULATION OR SUMMARY OF BID RESPONSES WILL BE MADE AVAILABLE AT THE RI DIVISION OF PURCHASES WEBSITE AT WWW.PURCHASING.RI.GOV

MULTI YEAR AWARD

THIS IS A MULTI-YEAR BID/CONTRACT. PER RHODE ISLAND STATE LAW 37-2-33, CONTRACT OBLIGATIONS BEYOND THE CURRENT FISCAL YEAR ARE SUBJECT TO AVAILABILITY OF FUNDS. CONTINUATION OF THE CONTRACT BEYOND THE INITIAL FISCAL YEAR WILL BE AT THE DISCRETION OF THE STATE. TERMINATION MAY BE EFFECTED BY THE STATE BASED UPON DETERMINING FACTORS SUCH AS UNSATISFACTORY PERFORMANCE OR THE DETERMINATION BY THE STATE TO DISCONTINUE THE GOODS/SERVICES, OR TO REVISE THE SCOPE AND NEED FOR THE TYPE OF GOODS/SERVICES; ALSO MANAGEMENT OWNER DETERMINATIONS THAT MAY PRECLUDE THE NEED FOR GOODS/SERVICES.